

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: MS/Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: May 12, 2008

Signature: 

(Bruno Polito)

Docket No.: SONYJP 3.3-1048
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Shigeru Sugaya

Application No.: 10/506,461

Filed: July 11, 2005

For: WIRELESS COMMUNICATION
APPARATUS, WIRELESS
COMMUNICATION SYSTEM, AND
WIRELESS COMMUNICATION METHOD

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: Group Art Unit: 2617
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: Examiner: F. A. Casca
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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Dear Sir:

In response to the official action mailed January 11, 2008, applicant submits the following amendments and remarks.

IN THE TITLE

Change the title as follows:

~~WIRELESS COMMUNICATION APPARATUS, WIRELESS COMMUNICATION SYSTEM,~~
~~AND WIRELESS COMMUNICATION METHOD~~ A WIRELESS COMMUNICATION
APPARATUS FOR COMMUNICATING WITH ANOTHER WIRELESS
COMMUNICATION APPARATUS AND A SYSTEM AND METHOD FOR
COMMUNICATION AMONG A PLURALITY OF WIRELESS COMMUNICATION
APPARATUSES



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AMENDMENT TRANSMITTAL LETTER

Docket No.
SONYJP 3.3-1048

Application No.
10/506,461-Conf. #8945

Filing Date
July 11, 2005

Examiner
F. A. Casca

Art Unit
2617

Applicant(s): Shigeru Sugaya

Invention: WIRELESS COMMUNICATION APPARATUS, WIRELESS COMMUNICATION SYSTEM,
AND WIRELESS COMMUNICATION METHOD


TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	25	- 25 =		x	
Independent Claims	6	- 6 =		x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					

- ☒ Large Entity ☐ Small Entity
- ☐ No additional fee is required for this amendment.
- ☐ Please charge Deposit Account No. _____ in the amount of \$ _____.
A duplicate copy of this sheet is enclosed.
- ☐ A check in the amount of \$ _____ to cover the filing fee is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized to charge and credit Deposit Account No. 12-1095
as described below. A duplicate copy of this sheet is enclosed.
- ☒ Credit any overpayment.
- ☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.


Bruno Polito
Attorney/Agent Reg. No.: 38,580

Dated: May 12, 2008

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